

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee American Media & Advocacy Group
Mailing Address 815 Slaters Lane
City Alexandria State VA Zip Code 22314
Purpose of Expenditure TV/media placement Category/Type 004
Name of Federal Candidate Carol Shea-Porter [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1440547.75

Date of Public Distribution/Dissemination 10 / 21 / 2014
Amount 1284051.52
Transaction ID : 001
Date of Disbursement or Obligation 10 / 14 / 2014
Office Sought: [X] House District: 01
[] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee American Media & Advocacy Group
Mailing Address 815 Slaters Lane
City Alexandria State VA Zip Code 22314
Purpose of Expenditure TV/media placement Category/Type 004
Name of Federal Candidate Carol Shea-Porter [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1440547.75

Date of Public Distribution/Dissemination 10 / 21 / 2014
Amount 4412.00
Transaction ID : 002
Date of Disbursement or Obligation 10 / 21 / 2014
Office Sought: [X] House District: 01
[] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1288463.52, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Caleb Crosby [Electronically Filed] Date 10 / 22 / 2014

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Full Name of Payee Push Digital
Mailing Address PO Box 7431
City Columbia State SC Zip Code 29202
Purpose of Expenditure Digital Advertising Category/Type 004
Name of Federal Candidate Carol Shea-Porter [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1440547.75

Date of Public Distribution/Dissemination 10 / 21 / 2014
Amount 10000.00
Transaction ID : 003
Date of Disbursement or Obligation 10 / 14 / 2014
Office Sought: [X] House District: 01 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Something Else Strategies
Mailing Address 212 Golden Willow Ct
City Easley State SC Zip Code 29642
Purpose of Expenditure TV/media production Category/Type 004
Name of Federal Candidate Carol Shea-Porter [] Support [X] Oppose
Calendar Year-To-Date Per Election for Office Sought 1440547.75

Date of Public Distribution/Dissemination 10 / 21 / 2014
Amount 19000.00
Transaction ID : 004
Date of Disbursement or Obligation 10 / 21 / 2014
Office Sought: [X] House District: 01 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 119000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Caleb Crosby [Electronically Filed] Date 10 / 22 / 2014
Signature

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Full Name of Payee Political Ink, Inc.
Mailing Address 1220 19th Street NW Suite 502
City Washington State DC Zip Code 20036
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate Carol Shea-Porter [X] Oppose
Office Sought: [X] House District: 01 State: NH
Calendar Year-To-Date Per Election for Office Sought 1440547.75
Disbursement For: [X] General 2014

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate
Office Sought: [] House District: [] State: []
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: [] Primary [] General [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 33084.23; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 1440547.75

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Caleb Crosby [Electronically Filed] Date 10/22/2014
Signature